

at most prior to initiation of the UAB continuing education program in 1974-75.

Conclusion

The UAB continuing education program appears to have been successful in modifying the clinical behavior of the optometrist participants. Optometric hypertension screening is highly cost-effective, and the UAB course provided "hands-on" instruction that may be an effective method for use in future continuing education programs.

References

1. Pierce, J. R., and Kleinstein, R. N.: Screening for hypertension by optometrists. *Am J Public Health* 67: 977-979 (1978).
2. The 1984 report of the Joint National Committee on Detection, Evaluation, and Treatment of High Blood Pressure. *Arch Intern Med* 144: 1045-1057 (1984).

3. National High Blood Pressure Education Program: Fact sheet. DHEW Publication No. (NIH) 75-632. U.S. Government Printing Office, Washington, DC, 1975.
4. Optometry and the nation's health. *J Am Optom Assoc* 49: 735-755 (1978).
5. Eghadal, R. H., Gertman, P. M., Taft, C. H., and Giller, D. R.: Continuing medical education and quality health care: what is the link? Springer International, New York, 1976, p. 11.
6. Bertram, D. A., and Brooks-Bertram, P. A.: The evaluation of continuing medical education: a literature review. *Health Educ Monogr* 51: 330-348 (1977).
7. Lloyd, J. S., and Abrahamson, S.: Effectiveness of continuing medical education: a review of the evidence. *Eval Health Prof* 2: 251-280 (1979).
8. Guerrein, R. L.: Who's screening for what—and who should be. *Rev Optom* 114: 68-73, September 1977.
9. Whitener, J. C.: A survey of hypertension curriculum in schools and colleges of optometry. *J Optom Educ* 6: 8-11, June 1981.

Placement of Health Promotion Columns in Suburban Newspapers—An Analysis

SUSAN K. MALONEY, MHS
DONNA J. PETERSEN

Ms. Maloney is Chief, Media and Community Programs, Office of Disease Prevention and Health Promotion, Public Health Service, Department of Health and Human Services, Room 2132, Mary E. Switzer Building, 330 C Street, S.W., Washington, DC 20201. Ms. Petersen, formerly an intern in the Office of Disease Prevention and Health Promotion, is now with the Maryland State Department of Health and Mental Hygiene, Baltimore, MD.

Tearsheet requests to Ms. Maloney.

Synopsis

In the fall of 1982, the Office of Disease Prevention and Health Promotion, Public Health Service, engaged the services of the North American Precis Syndicate, Inc., to distribute two columns on health

promotion to suburban newspapers. An analysis of the placement of these two health promotion columns in local newspapers was undertaken to determine if this method of disseminating health information to the public is effective and cost-conscious. The information gained from this analysis, though limited in scope, provides information to decision makers responsible for disseminating health information to the public.

North American Precis Syndicate, Inc. (NAPS), distributes public information through various channels. One service NAPS provides is a clip sheet of publication-ready newspaper columns complete with artwork which an editor can "clip" and use directly in a newspaper. NAPS is able to use existing information and artwork to develop its columns, so agency staff time is minimal in developing material. NAPS also provides clippings of the articles as they actually appear in the 3,800 suburban newspapers it services. It is the information from the NAPS "clipping service" on which this report is based.

IN THE FALL OF 1982, the Office of Disease Prevention and Health Promotion distributed, through the North American Precis Syndicate, Inc. (NAPS), two columns to local newspaper editors throughout

the country. These brief messages were designed to remind the public of good health habits and to reinforce the idea that these actions lead to better health. A sample is illustrated in fig. 1.

The two columns, entitled "Family Health" and "Fancy That," appeared beginning in October 1982. We analyzed the clippings of the articles supplied by the NAPS service as to how often each column appeared, the geographic distribution for the newspapers in which each appeared, an estimate of the population reached, and the costs of distributing the information.

The Results

Number of clippings. Between October 1982 and May 1983, NAPS generated 243 clippings of the "Family Health" column and 238 "Fancy That" columns, for a total of 481 clippings. However, due to a 28 percent rate of duplication in clippings received from NAPS, the actual number of verified placements was 174 for "Family Health" and 171 for the "Fancy That" column, totaling 345 known placements.

According to NAPS, from 100 to 400 such clippings can be expected from each article. NAPS claims this represents approximately one-fourth of actual placements. This estimate of "25 percent clipping efficiency" is based on the finding that when an article offers a free booklet, 75 percent of requests for the booklet come from places for which the NAPS clipping service had no article. Considering the relatively high rate of duplicate clippings, the 25 percent estimate appears high.

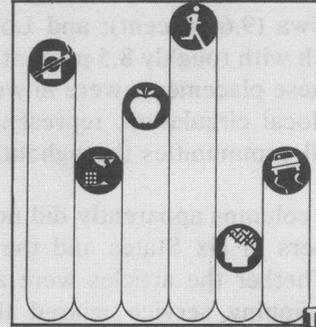
Geographic location. According to clippings generated, "Family Health" appeared in 37 States and "Fancy That" in 41. Between the two, newspapers in 44 States published one or both columns. Placement per State ranged from 1 to 13 for "Fancy That" and from 1 to 19 for "Family Health." The majority were printed in local weeklies with small circulations. Relatively few columns appeared in major metropolitan areas and those that did were generally found in local shopping guides or neighborhood-specific weeklies. For instance, "Fancy That" appeared in 12 weekly Texas papers with circulations under 4,000 each and in one Texas daily with a circulation of 20,000. The "Family Health" column was printed in 17 weekly papers in Minnesota with circulations ranging from 876 to 6,018.

These examples illustrate the great potential this service has for reaching diverse localities which generally may not be exposed to major media markets or for supplementing information distributed to major markets.

Comparing the number of placements to the number of newspapers receiving the clip sheet in



You and your family can protect your health. Here, from the experts at the U.S. Department of Health and Human Services, are some sensible suggestions to follow:



There are many health risks that you can control.

- *Avoid cigarettes.* Cigarette smoking is the single most important preventable cause of illness and early death.

- *Follow sensible drinking habits and use care in taking drugs.* If you drink, do it wisely, and in moderation. Even some drugs prescribed by your doctor can be dangerous if taken when drinking alcohol or before driving.

- *Eat sensibly.* A sensible diet can reduce your risk of heart disease. If you are overweight, lose it. Overweight individuals are at greater risk for diabetes, gall bladder disease and high blood pressure.

- *Exercise regularly.* Almost everyone can benefit from exercise—and there's some form of exercise almost everyone can do.

- *Be safety conscious.* Think "safety first" at home, at work, at school, at play, and on the highway.

Remember, good health is not a matter of luck or fate. You have to work at it.

each State gives a clearer picture of the potential of the service for reaching "hard to reach" areas. "Fancy That" appeared in 18 percent of newspapers in Nevada and North Dakota; 13 percent of newspapers in Tennessee; 11 percent of Utah, Oklahoma, and Louisiana papers; 10 percent of the papers in Massachusetts; and 8 percent of those in Florida. The "Family Health" column ranged in distribution from slightly less than 1 percent in New Jersey to slightly less than 15 percent in Tennessee. Relatively high placement rates occurred in South Dakota (14.6 percent); Mississippi and Minnesota (14 percent); Alabama and Utah (11.1 percent); Texas and Iowa (9.6 percent); and Louisiana and Montana, each with roughly 8.5 percent. Again, the majority of these placements were in weekly newspapers with local circulation, representing a wide range of small communities throughout the United States.

The health columns apparently did not appear in any newspapers in six States and the District of Columbia. Whether the articles were actually not run or the clipping service missed them is not known. Interestingly, several newspapers in Minnesota and South Dakota ran the columns on more than one occasion over a 6-month period.

Circulation. Of the 345 placements verified through clippings received, approximately 60 percent (211) supplied details of their daily or weekly circulation. Total circulation for those newspapers providing such information equaled 939,389—513,378 for "Family Health" and 426,011 for "Fancy That." Dividing the total circulation by the number of newspapers listing these figures produced an average circulation of 4,452. This number, the average circulation per placement, was then extrapolated to the total number of placements to arrive at an estimate of the total circulation for the entire project. That calculation yielded a figure of 1,535,940 persons potentially exposed to one of the two releases as follows:

<i>Circulation factor</i>	<i>Number</i>
Placements verified by clippings	345
Circulation verified by clippings	939,389
Average circulation per placement	4,252
Estimated total circulation	1,535,940

Cost. The total cost for the 2 columns was \$2,600, or \$1,300 per column. The breakdown in cost per placement and cost per circulation shows:

<i>Cost—</i>	<i>Amount</i>
Per verified placement	\$7.55
Per verified circulation	\$0.30 per 10,000
Per estimated total	\$0.17 per 10,000

The 2 columns were distributed to approximately 3,800 local newspaper editors; 345 newspapers printed them, as verified by clippings received; average circulation per placement was 4,452, based on circulation information received; total number of persons known to have been exposed to the release was 1,535,940, at a cost of \$2,600, for a final cost estimate of 17 cents per 10,000 circulation.

It is difficult to reach a reasonable conclusion on material and estimates provided entirely by the agency performing the service. If the estimates of probable placement and clipping efficiency are accurate, then a fair assessment of the service has been made. Presumably, these particular columns must compete with others of unknown quality for placement; to what extent this occurs is not known. The quality, subject matter, or length (or all three) of the column presented to the suburban editor may therefore affect the likelihood of its being placed, yet this is not discernible from any information offered by the NAPS.

Though equivocal, information on placement and circulation does give a basis for limited analysis; no evidence is available, however, on actual penetration of the target audience, or on readership. The analysis must stop with an estimate of exposure; any discussion of reinforcement, awareness, response, or action is based on an assumption of readership and must remain circumspect.

Several pertinent points do stand out, however. In using the North American Precise Syndicate, Inc., the Office of Disease Prevention and Health Promotion used virtually none of its own staff time. The columns were created from existing materials, and all production and mailing was done by the NAPS. Clippings were received regularly, but it is not known how effective an indicator of the distribution and placement this clipping service is. From the columns that did appear, it became apparent that the information was going out locally, to areas perhaps not ordinarily reached by more traditional forms of media dissemination. While the use of small town newspapers is not necessarily a substitute for larger mass-media campaigns, based on this analysis, it does appear to be an effective and inexpensive way of reinforcing positive health practices, and therefore may serve other interests as well.